

# THE TODDLER

CHILDHOOD THROUGH ADOLESCENCE



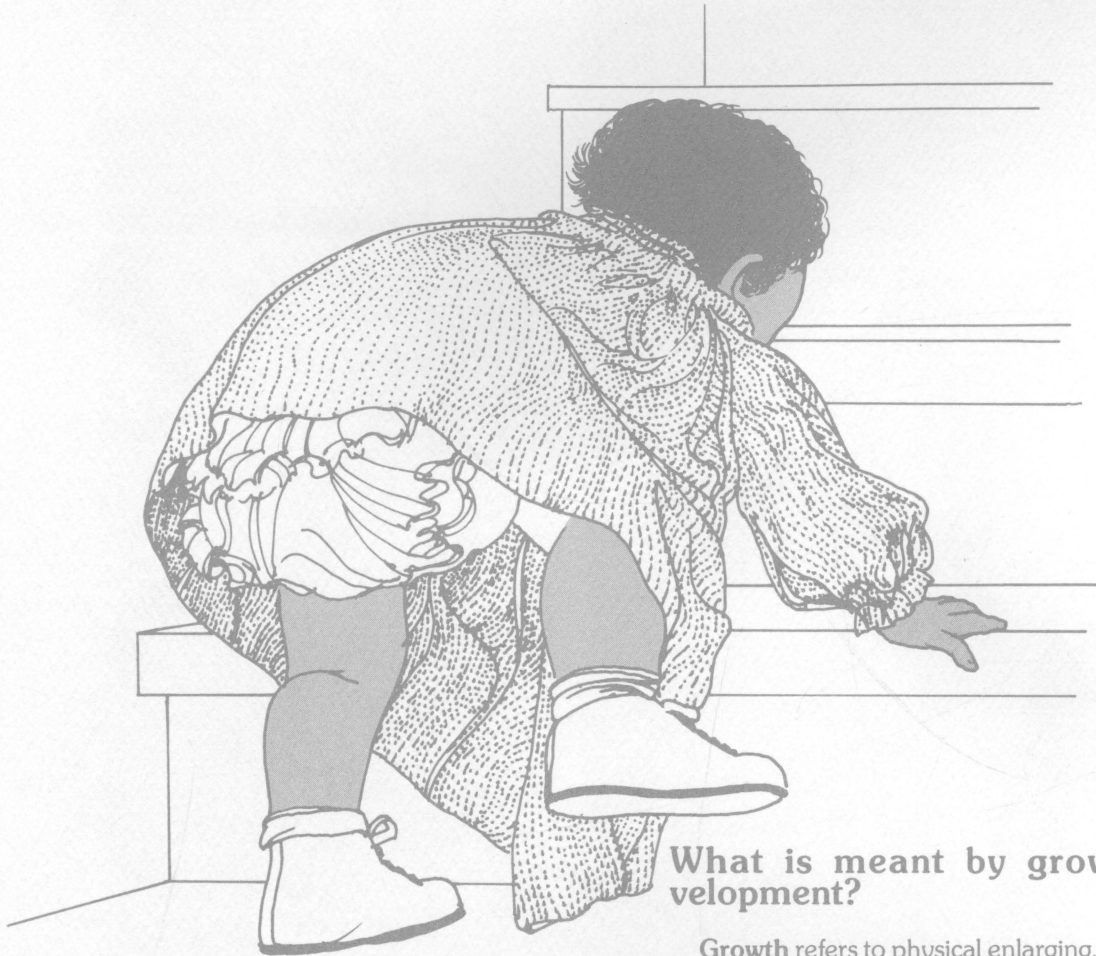
Book 2:

## THE TODDLER



Cooperative Extension Service  
The Ohio State University

## Book #2: The Toddler (15 months to 2½ years)



Between the dependent period of infancy and the relatively independent pre-school years, come the very busy months during which children are called toddlers. This is the time when children's individuality really becomes noticeable, when the uniqueness of particular personalities is recognized.

There are several important stages of development which occur between the ages of 15 and 30 months (2½ years). Awareness of the growth and development which take place during this time helps adults understand and enjoy active toddlers. People have a natural capacity for parenthood, which can be greatly strengthened by knowing what happens within the maturing child as well as why and how the advancements take place.

### What is meant by growth and development?

**Growth** refers to physical enlarging. It includes changes in size and in proportion of body parts. **Development** means the increasing capabilities, both mental (psychological) and physical (physiological).

It is important to remember that each toddler grows and develops in an individual manner, almost as if controlled by a personal inner time-clock. The **pattern of growth** is what is important, not the exact time at which any single behavior occurs.

The physical growth of a toddler is not as striking as was that of the infant (who seemed to grow out of clothes before they'd been worn twice). The "average" two-year-old weighs roughly 26 pounds (11.8 kg.), which is only a few pounds heavier than the weight at one year. The healthy appetites of most infants decrease drastically in toddlerhood as a result of the slower physical growth.

Some specialists believe that doubling the height of a two-year-old accurately predicts the height which that individual will attain as an adult.

The child's development is affected by the environment and by the actions of care-taking adults. Environment influences behavior but does *not* determine it. Inner needs and forces within the child are also involved.

## Behavioral development of toddlers

The behavioral development of toddlers is usually discussed under four categories: language, cognitive, motor, and personal-social. These four areas are closely interrelated, and each will be explained separately.

**Language development** is learning to understand and use language to communicate with others. Many believe that much early language learning happens by an unconscious absorption of the words the child hears. An understanding of what others say occurs long before the child learns to use words.

Language progresses from the babblings of infants through pre-verbal vocalizations to real speech. Toddlers often converse in expressive jargon, which sounds like real speech in a foreign tongue.

Toddlers also use holophrases, or one-word sentences. A single word such as "walk" can mean "I want to go for a walk." With the expression the toddler puts into the one word, the meaning is usually clear. Listening and responding to a child learning to speak is a delightful experience.

**Cognitive development** is the growth of thinking skills. It is not gaining specific concrete skills (such as recognizing letters of the alphabet and identifying colors) but is the whole mental process by which knowledge is acquired. It particularly includes adaptive skills and problem-solving. The toddler becomes able to recognize important elements in situations and to utilize past experiences to adapt to new ones.

**Motor development** is the growth of the ability to control and coordinate movement. It is quite predictable and is most evident in the toddler's transition from a quadruped (crawling on all fours) to a true biped (up on two feet). At first the toddler merely walks but all too soon running becomes the usual method of getting around. Adults can exhaust themselves rapidly just by attempting to keep up with quick-moving young toddlers. Trying to keep one step ahead at times can seem to be an almost impossible task.

The toddler is about 29 inches (74 cm.) tall, which puts the child's head right below ordinary table top level. (Use care, for the toddler can stretch, see — and grab.) In just a few months doorknobs will be within reach, which opens whole new areas for busy explorers.



Toddlers have a wide-based gait, and they lean forward when walking or running. A fall at age two may result in a bruised forehead, at two-and-one-half the nose gets the brunt of the tumble, and between three and four years it is the teeth which take the blow. But the tumbles rarely do much damage since toddlers are close to the ground to begin with and fall limp and relaxed.

In the **personal-social category**, the child gains an awareness of self as a person (psychological autonomy). The well-known negativism of toddlers is part of the search to figure out what is self and what is someone else. Some awareness grows out of the toddler's own actions, and some comes from other peoples' reactions to what the child does. Personal-social development is not very predictable, and yet it is very important. Children need to develop healthy concepts of themselves to serve as sound foundations for the rest of their lives. How parents habitually talk to their children influences the images children form of themselves.

During toddlerhood, the child learns many things, some momentous and others not. Most toddlers learn to drink through a straw, to eat correctly with spoons, to blow their noses into handkerchiefs held by adults, and to eat ice cream cones. In late toddlerhood, many children learn to ride tricycles. Most toddlers become good at removing their clothes (anytime, anywhere, and most often when least expected!).

The important fact to remember is that each child develops in a unique manner. All children pass through similar stages, but each toddler does things in an individual way.



## What is a toddler like?

The *fifteen-month-old*, who has just “graduated” from infancy, strains ahead to exercise new powers of initiative. The toddler of this age is often characterized as being demanding and assertive, which is part of the growing compulsion to “do it myself.”

Toddlers can learn skills which involve some fine motor coordination. However, development takes time. The caution to parents should be “Don’t push. Let everything come in due season.”

It is important that the toddler be allowed to explore and make use of toys and objects found, without being prodded by an adult to “do it right.” Kitchens fascinate most toddlers, and mothers soon learn to fix dinner while a busy little person “cooks” with empty pans, covers, spoons and plastic containers. An observant parent can almost see the learning taking place as the toddler works with determination to screw the cover on a small “safe” jar or to place a number of graduated objects inside one another.

Even the toddler who walks well likes short confined play periods in playpen or crib (provided the child was previously accustomed to playing quietly alone). Adults will notice evidence of the toddler’s **casting behavior** — all the toys often end up in a ring around the outside of the crib or pen. Food and utensils are also thrown down and out from the high chair during the toddler’s experiments with space orientation.

Early toddlerhood is a busy time, for the youngster is liable to be into everything. Many babies become especially adept at emptying wastebaskets, cupboards, and closets. Mealtimes continue to be very messy, and playing with food increases as appetites decrease. The spoon still arrives at the mouth upside down. Learning to use a spoon in the correct, right-side-up manner is a very complicated maneuver.

The *eighteen-month-old toddler* has a strong locomotor drive (urge for self-propelled movement) and is almost continually running up and down stairs — chasing hither and yon — and lugging, tugging, pushing, pulling, dumping and pounding. The toddler at this point is involved in gross motor actions rather than fine motor ones. Even painting is done with whole arm movements rather than with small motions of wrist and hand.

The *eighteen-month-old* is still in the “get into everything” stage and has a short attention span which is centered only on the here and now. Toddlers of this age often watch adults and imitate their actions, especially certain household duties such as sweeping and dusting.



Youngsters in mid-toddlerhood are often relatively self-contained and able to play well alone for periods of time. By this time strong attachments may have been formed to a blanket, teddy bear, or other soft cuddly toy. Some awakening at night may occur around 18 months of age. This often seems to be associated with a very active or exciting day.

Dressing an eighteen-month-old can be easier than it was at the beginning of the toddler stage when the child practically had to be poured into the clothes. Now the toddler helps to dress and is rapidly learning to undress alone. The development of motor coordination aids this progression of greater independence.

By *twenty-one months*, the toddler has become more definite about a number of things. Food likes and dislikes are well defined, for example, although the favorite food this week may drop way down on the list by next week. Use one dish at a time, or the toddler will immediately get busy pouring things from one to another.

Sleep difficulties seem to be more common around 21 months. The toddler may have difficulty gearing down and falling asleep, may wake during the night, and may get up fussy, especially after naps. This is a stage which will pass. Some toddlers of this age are toilet trained for bowel movements and some are not.



The twenty-one-month old is more responsive to adults and more demanding of them. Participating in such household activities as putting away groceries and picking up toys is fun. The toddler has a new awareness of people and a dawning sense of property rights, especially in regard to items which are considered personal possessions of the toddler.

The toddler is in a pre-cooperative stage of watching rather than participating with others in play. Because toddlers are self-centered, they cannot yet share. Hoarding and possessive holding onto toys is common and is part of learning "It's mine." (A child, of course, often claims everything.) Toddlers are concerned about where things are put and the way in which routines are carried out. Bedtime demands often become elaborate, unvarying and inescapable rituals.



Hitting, patting, poking, biting, hair-pulling, and tug of wars are common behaviors of two-year-olds and are part of normal development. Adults can't reason successfully with children of this age. Sensible techniques, which usually include diversion, are needed instead. For example:

"No, you may not put the silverware on the floor" (emphasized by removing the busy little hand from the drawer). "Look, here are some plastic bowls you may use instead. I wonder if you can put the covers on."

The two-year-old is cutting the last of the early teeth, is sturdily erect, and is beginning to put words together. The toddler can kick a ball but can't yet stand on one foot. Sandbox play and water activities are very popular. Fitting things into one another is a favorite task which shows the child's improving coordination.

Some children can be successfully toilet trained (during waking hours only) by two years. Physical maturing makes voluntary control of bowel and bladder sphincter muscles increasingly possible. But many others need more growing time.

The two-year-old still demands attention, is often dependent on mother, and is commonly shy with strangers.

The *two-and-one-half-year-old* has a reputation of going to contrary extremes. Some specialists suggest thinking of these toddlers as preschool editions of slightly confused adolescents who haven't yet found their way.

The child in late toddlerhood must be managed more than disciplined. Temper tantrums are common. They indicate how mixed up the older toddler is, wanting to be independent and yet hating to give up close adult attention. The toddler because of immaturity is unable rather than unwilling to react in a calmer way.

Often by two-and-one-half years of age, the child is completely toilet trained. However, night-time wetting is still routine. Speech continues to advance, but appetites fluctuate. Play with other children is still difficult, often noisy, and frequently traumatic. The thirty-month-old toddler is more ritualistic than the two-year-old.

## Equilibrium and disequilibrium

Throughout the stages of development, from birth to adolescence, there are regular repeating cycles of equilibrium (calm) and disequilibrium (turmoil). Growth does not proceed in a simple straight line.

Each age has its own task which must be accomplished, and the onset of immature behavior actually is a signal that a new stage of development is being tackled. The "bad" days are days of high tension because the child is making a thrust into a more advanced sphere of behavior. The months of early toddlerhood are often unsettled. A period of equilibrium occurs around age two. By two-and-one-half years, there is often again marked disequilibrium.

## Discipline and limit setting

Regulating behavior in toddlerhood calls for parental self-confidence. Parents must be able to act decisively and to distinguish between **needs** and **wants** of the child. It's important for adults to be relaxed and to "make haste slowly" with toddlers (don't push small children too hard). Toddlers can't comprehend moralizing; it is beyond them. Adults must **show** love, concern, and respect but should not expect small youngsters to understand preaching about it.

Limits for toddlers should be set in a definite manner. Reasoning with such small children just doesn't work. Above all, it is important to guard against letting the child lose face too much.

When misbehavior occurs, the emphasis must be put on the *act*, as much as possible, and not on the toddler's total worth as a person. Toddlers need to know that parents love them even while being angry at something they have



done. Parents frequently should reassure small children about their continuing love. (It helps to hug a small person who's having a rough day and say, "**I love you** even when I'm mad about something which you have done.")

**Limits** set by parents should be firm, reliable, and reassuring. They should establish definite guidelines so that the toddler knows what is allowed and what is not acceptable. Adults should say "No" only for important things, should take action quickly and decisively to reinforce the "No" and should tell the child what to do instead. Reserving the use of "No" and "Don't touch" for dangerous or positively forbidden acts is important. If a parent constantly says "No, No" about everything, the toddler becomes bewildered and all too soon tunes out the adult and ignores the commands entirely. (Count to ten before speaking, and many times a "No" can be avoided as the curious toddler may have moved on to something acceptable.)

Children not only need but really ask for limits from caring adults. But the guidelines must be part of the adults' total commitment to the children. The limit setting cannot be done just in reaction to some immediate provoking behavior.

It is tremendously important to a child to have someone in control. Even young toddlers want to be stopped, and are aware that they are unable to stop themselves. Negativism increases with age and so does the need for limit setting and discipline. According to Dr. T. Berry Brazelton, an experienced parent and a pediatrician, it is an inevitable part of the second year for children to push parents to their limits. It is not meanness on the toddler's part, but an element of that stage of growth.

**Discipline** is a necessary part of learning to live with others. It can be defined as a "constructive regulation of behavior" or a "bringing under control." Discipline includes limits, both those established by adults and those which children (even young toddlers) learn to set for themselves.

Most of today's parents were raised by the reward and punishment method of discipline. They were rewarded when they obeyed and punished when they disobeyed. Many parents will use this disciplinary system with their children. They must be careful to insure that the punishment fits the misbehavior and the child. Children must also be rewarded with praise and approval when they do things right.

An alternative method of discipline allows children to make decisions and then experience the consequences arising from their choices. Sometimes the consequences occur naturally; for example, the child who refuses to wear mittens gets cold hands. In other instances, the parents must design logical consequences: "If you do not keep your clothes picked up and empty the trash each day, you will not receive your allowance at the end of the week."

Guidance and discipline are complex and dynamic processes between parents and children. It is most important in both discipline and in limit setting that the adults involved be consistent and that they care about their children.

## Toilet training

Toilet training is like most other areas of development; in general, the less the fuss, the easier the learning. Children need some help but mostly just require encouragement to train themselves at their own speed. Bowel control usually comes first, with bladder control happening later and in two stages (waking and sleeping). Bowel and bladder control are complicated behavior patterns which are greatly influenced by maturity factors and can't be hastened.

Toilet training is a very big developmental step in the process of maturation. It is best if the child does it when ready. Pressure by adults to train toddlers creates problems, constipation cycles, and outright failure. Punishment of the child for not using the toilet or for accidents (many of which are bound to occur), almost guarantees failure to complete the training. Because successful toilet training is so important to a child's self-image, parents should seek help if a problem occurs. Do not begin to **worry** about daytime training until the child is 3½ to 4 years old or about night time wetting (enuresis) until 6 years.

For discussion about specific methods of helping children become toilet trained, consult the following books:

1. T. Berry Brazelton, M.D., *Toddlers and Parents*
2. Benjamin Spock, M.D., *Baby and Child Care*



## Sibling rivalry

Sometimes a new brother or sister arrives in the home of a toddler. Parents often wonder how such a young child will respond to the new baby and what they can do to prevent sibling rivalry.

Rivalry among children in the same family is inevitable, natural, and healthy. Jealousy between siblings can't and shouldn't be avoided. The jealousy may be temporarily hidden, but it will come out sooner or later. Sibling rivalry is a fact of family life. It is not a sign of parental failure!

When there is to be a new baby, the toddler will need to be told in a simple manner. Give the facts in a way the child can understand, and be prepared to repeat them again and again. Try to avoid telling a toddler too far in advance of the big event.

The toddler doesn't resent the new baby at first; the resentment is over the separation from the mother (when she's in the hospital and at home, later, when she is so involved in the baby's care). The infant should be protected from the toddler to insure that harmful "accidents" can't happen. Put the infant seat inside a playpen rather than on a counter, close the door when the baby is asleep

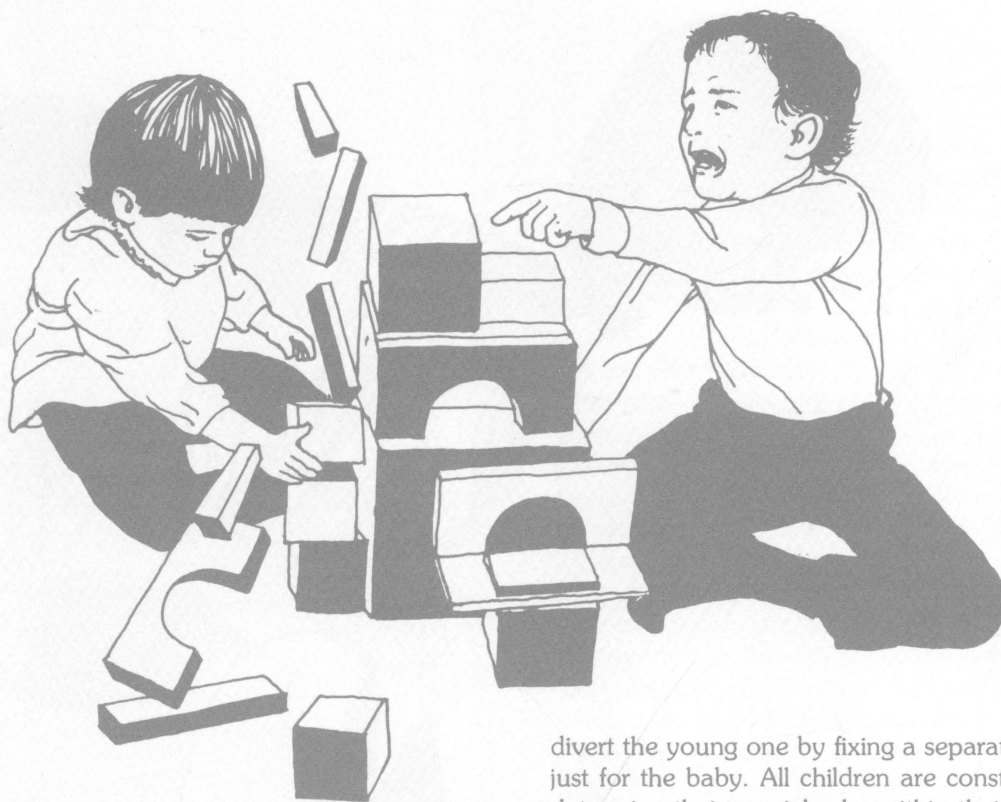
in the crib, and don't leave the toddler alone with the baby for any length of time.

Be sure the toddler continues to receive plenty of attention and is included in some of the baby's care. Sing songs, play quiet games, or read to the toddler during the infant's feedings. Save the one-to-one times with the baby for the hours when the toddler is asleep. Show the toddler what is allowed with the baby ("Shake hands gently," "Feel the little feet"). Avoid saying, "Don't pull the hair!" and "Don't poke the eyes!"). It's hard to remain calm, warm, and helpful toward an inquisitive and impetuous toddler while at the same time meeting the round-the-clock demands of a newborn. However, the adjustment of the toddler depends on planned protection given in a kindly manner.

Occasionally a young child will hurt a new baby, either while just checking to see if the eyes really work or by striking out at the baby in response to inner impulses. Strange as it may seem, it is the older child who should be reassured and comforted on such occasions. Otherwise the toddler's guilt and negative feelings will increase.

The toddler needs help in reacting favorably to a new baby in the family. There is much energy involved in making such a big adjustment. Parents should not expect any new developmental steps (such as toilet training) to





divert the young one by fixing a separate stack of blocks just for the baby. All children are constantly working to determine their special roles within their families.

take place at the same time, and they should anticipate some temporary regression in behavior.

Soon the baby will grow into a creeper who gets right into the middle of the older child's play space and toys. The toddler has to do more adjusting then. As a rule, it is best to let siblings work things out on their own. Sometimes the adult must leave the scene entirely. That is hard, but it does work. For as long as the parent is present, the struggle is triangular in nature with both children competing for the parent's attention. Without the adult, the squabble isn't worth it, and the children figure out some sort of solution. Siblings make a better relationship with each other on their own, and it is important that they learn to cope with rivalry in childhood.

Acute problems of sibling rivalry often arise because parents get too involved in defending each child from the other. Occasionally, of course, adults must intervene to sort out the combatants, but as a rule it is much better to pretend to be unaware of squabbles. Be absorbed in your own work and listen to how the children resolve their battles. Without a referee, the players have to devise their own rules, and they learn to do so quite quickly and successfully.

It is important for each child in a family to have individual time with one or both parents on a regular basis (daily if at all possible). As soon as children are old enough to understand, parents should also talk about sibling problems with them. Suggestions for coping with the situations which usually lead to disagreements can be discussed. If a creeping baby routinely knocks down a toddler's block towers, for example, the older child can be shown how to

## Self-awareness

A large part of toddlers' development is the process of self-identification and of learning to be members of their families and of society. A toddler must develop autonomy (independence and self-awareness) or end up with shame and doubt. Failure to establish autonomy in childhood can result in lasting feelings of worthlessness and incompetence.

Negativism is a part of the toddler's search for autonomy. It is a normal and even essential part of development. Unless it is inflated into a major issue between parent and child, negativism soon becomes less noticeable. If parents become strongly upset when faced with negativism, they reinforce that aspect of behavior, which in turn leads to even more negativism.

Adults must be a bit clever in handling negatively inclined toddlers who need help in adjusting to changes in their daily routines. Adults should use care to avoid initiating head-on verbal collisions. If you're going to the grocery store, for example, say "It's time to go shopping. Do you want to carry the list, or shall I?" Don't say "Do you want to go to the grocery store?" This will result in an automatic "NO" and cause you to battle with the child all the way to the car.

Be ready to retreat a bit and approach things from a new angle. After the statement that "It's bedtime" is greeted by "No" say, "I bet you can't get into bed while I'm not looking!" Support and limit the child but don't overreact to the negative words and actions. The negative stage does pass.

## Toddlers at play

Most of the time, toddlers prefer large muscle activity to small. They usually choose big toys over little ones. Young children use their whole bodies in action-space activities rather than trying to manipulate complex playthings. Toddlers love to carry, haul, shove, trundle, and move things. The activity itself is what is important to the child, not the completion of the total task. Young children perform much better on tasks they set themselves than on those suggested by adults.

The social dimension of play follows a definite developmental pattern. In the earliest playing, adults participate and there is no play with peers (children of the same age). Solitary play comes next, followed by parallel play (side by side but without real interaction).

Associative play is where a number of children all do the same thing but still separately. True cooperative play, where discussions and role assigning take place, doesn't begin until after three or in the pre-school years. So, don't expect two toddlers in a sandbox to actually play with each other or to share toys.



Children learn about themselves and the world around them through toys. They need to use their imaginations in play. Homemade toys are **great**. They represent a form of communication and are invested with magic from the parents.

Purchased toys are good too, but care should be taken in their selection. Are they worth the price? Is too much expected from a toy? Is it for the right age level? Are there complicated parts to break? Are extra batteries needed? Above all — is it safe?

## Safety

Toddlers are such active explorers and have developed so little common sense that adults must be constantly on guard to be sure that their youngsters stay safe. Before young children are let out to play, the yard should be checked for hazards such as stray lawn equipment. Paint and other supplies should be secured in the garage or tool shed. Toddlers must be kept from running into the street or from rolling into the road on toys. Adult supervision near any kind of water (even small wading pools) is essential, since most toddlers are fearless and don't understand what one can and cannot do in water.

Children from fifteen to thirty months of age should definitely ride in **dynamically tested** automobile safety devices on all car trips. The pamphlet "Don't Risk Your Child's Life" compares the various safe car seats available according to convenience of use. Additional information can be obtained by writing to:

Physicians for Automotive Safety  
Department OSU  
50 Union Avenue  
Irvington, New Jersey 07111

Parents must be equally concerned with safety inside the home when busy toddlers are present. Poisons and harmful chemicals (including alcohol, household cleaners, cosmetics and even perfume) should be kept on high shelves, along with knives and other dangerous equipment.

Medicines should be locked up. Toddlers will taste everything! Paint used on toys and in the home should be lead free. Space heaters, radiators, fireplaces, cigarettes and matches, dangling cords, irons, toasters, and pot handles on stoves all require special treatment. Use only cool mist vaporizers in sickrooms. They are better for the health and also eliminate the danger of burns to curious youngsters.

Young toddlers should not be allowed to have balloons or chewing gum, since both are too easily inhaled down the windpipe. If children are given lollipops or popsicles, they must sit down to eat them to avoid injury from the sticks. Lollipops with flexible bent handles can be found in some stores and ice cream cones, which taste just as good as popsicles, don't have sticks.

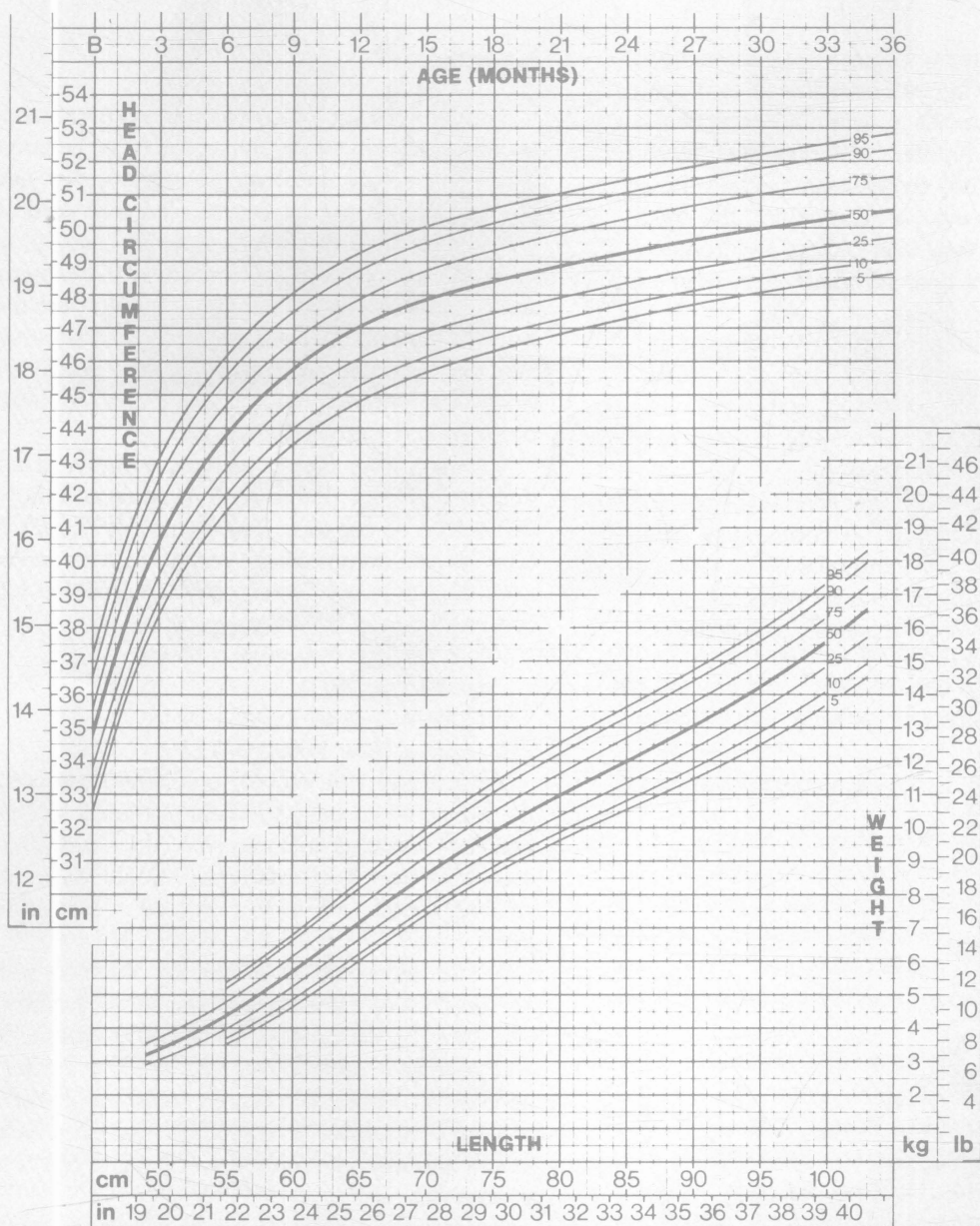
Check locks on doors ahead of time to plan on the method of opening them when toddlers lock you out or themselves in. Invest in extra safety catches to make certain cupboards child proof before the toddler tastes something harmful.

Preparedness is the key word for adults in coping with the period between fifteen and thirty months of age. But enjoyment is a good word too, for toddlers are delightful little people. They develop rapidly and grow up all too soon.

**BOYS: BIRTH TO 36 MONTHS  
PHYSICAL GROWTH  
NCHS PERCENTILES\***

NAME \_\_\_\_\_

RECORD # \_\_\_\_\_



\* Adapted from: National Center for Health Statistics: NCHS Growth Charts, 1976. Monthly Vital Statistics Report, Vol. 25, No. 3, Supp. (HRA) 76-1120. Health Resources Administration, Rockville, Maryland, June, 1976. Data from The Fels Research Institute, Yellow Springs, Ohio. © 1976 ROSS LABORATORIES

DATE	AGE	LENGTH	WEIGHT	HEAD C.

From Birth  
**SIMILAC® WITH IRON**  
Infant Formula

For Milk Sensitivity  
**ISOMIL®**  
Soy Isolate Formula

After Formula . . . Before Milk  
**ADVANCE®**  
Nutritional Beverage

**ROSS LABORATORIES**  
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**To record weight:**

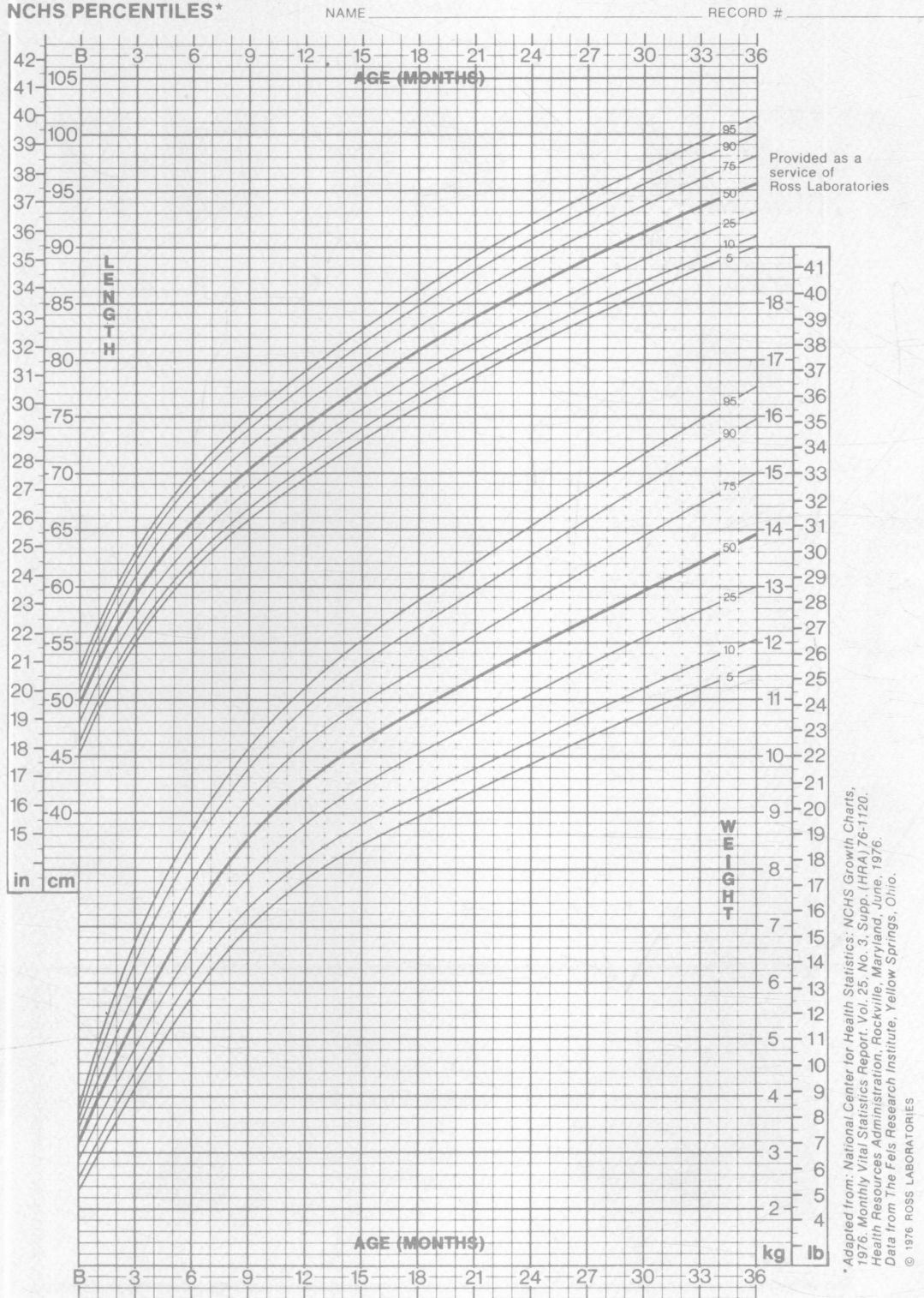
Find the correct weight on **either** the lb. (pound) or kg. (kilogram) scale. Follow that horizontal line across to the left until it crosses the proper vertical age line. Put a dot where they meet.

**To record length:**

Find the correct length on either the in. (inches) or cm. (centimeters) scale. Follow that horizontal line across to the right until it crosses the proper vertical age line. Put a dot where the two lines meet.



**GIRLS: BIRTH TO 36 MONTHS  
PHYSICAL GROWTH  
NCHS PERCENTILES\***



**Percentiles:**

The curving lines across the center of the charts are percentiles (frequency divisions on a scale of 100) from the National Center for Health Statistics. The percentiles let people see how a particular child's growth compares with others of the same age. For example: if a boy age 18 months weighs 25 pounds, the dot falls on the 50th per-

centile line. This means that half of all 18-month-old American boys weigh less and half weigh more. The 25 pounder is right in the middle. If that same 18-month-old boy is 34 inches tall, he is taller than 90 percent of other American males of the same age (the dot where the horizontal length line and the vertical age line meet is on the 90th percentile).

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